



DEOCS SURVEYS



Overview

- **Purpose**
- **Ordering**
- **Points of Contact**
- **Steps in using the DEOCS**



Purpos e

- **Assess EO climate of unit**
- **Identify possible issues or trends**
- **The results belong to the commander**
- **Not a report card**



Ordering a Survey

To order surveys go to:

- **www.deomi.org**

DEOMI Menu

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DEOMI

DEFENSE EQUAL OPPORTUNITY MANAGEMENT INSTITUTE

"Equal Opportunity = Readiness"



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**DEOCS**

DEOCS replaces the former MEOCS.

DEOCS is available in two versions: Online or Paper.

[DEOCS Talking Paper](#)

[Sample DEOCS](#)

[Sample DEOCS Report](#)

[REQUEST A SURVEY](#)

DEOCS General Information

[Survey Administration Guide](#)

[Sample Commander's Memo for Survey Administration](#)

[Common Problems](#)



Defense Equal Opportunity Management Institute

Organizational Climate Survey (DEOCS)

[CLICK HERE BEFORE YOU MAKE YOUR REQUEST](#)

[Download Sample DEOCS](#)

[Download Sample DEOCS Report](#)

[Download List of Required Information](#)

[Download Sample Locally Developed Question List](#)

[Request New Assessment](#)

[Request for Assistance](#)





Defense Equal Opportunity Management Institute

Organizational Climate Survey (DEOCS)

REMINDER: A minimum number of **16** assigned personnel is required to request a DEOCS assessment. You will need the below information to complete this request.

Unit Identification Code (UIC)/PAS Code for USAF
 Mailing Address of Organization
 Branch of Service
 Service Component
 Rank/Grade of Survey Administrator
 Email of Survey Administrator
 DSN Phone Number of Survey Administrator
 Commercial Phone Number of Survey Administrator
 Rank/Grade of Commander/Director
 Name of Commander/Director
 Email of Commander/Director
 Number of Passwords Required to take Online Survey
 Number of Bubble Survey Response Sheets Required to take Paper Survey
 Mailing Instructions for Paper Survey Response Sheets

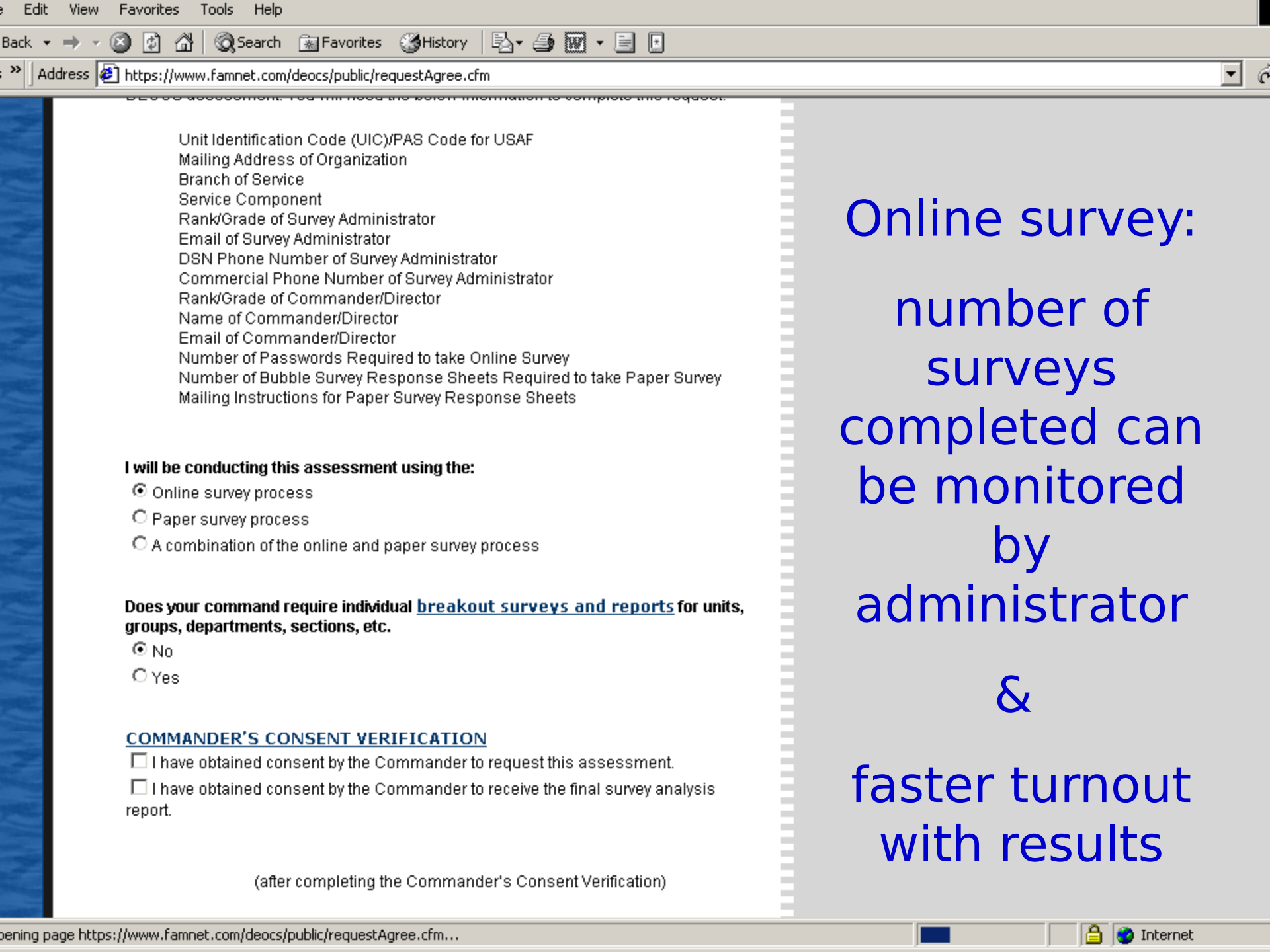
I will be conducting this assessment using the:

- ☒ Online survey process
- ☐ Paper survey process
- ☐ A combination of the online and paper survey process

Does your command require individual breakout surveys and reports for units, groups, departments, sections, etc.

- ☒ No
- ☐ Yes

A
 minimum
 of 16
 assigned
 personnel
 in unit
 required
 to request
 a survey



Unit Identification Code (UIC)/PAS Code for USAF
Mailing Address of Organization
Branch of Service
Service Component
Rank/Grade of Survey Administrator
Email of Survey Administrator
DSN Phone Number of Survey Administrator
Commercial Phone Number of Survey Administrator
Rank/Grade of Commander/Director
Name of Commander/Director
Email of Commander/Director
Number of Passwords Required to take Online Survey
Number of Bubble Survey Response Sheets Required to take Paper Survey
Mailing Instructions for Paper Survey Response Sheets

I will be conducting this assessment using the:

- ☒ Online survey process
- ☐ Paper survey process
- ☐ A combination of the online and paper survey process

Does your command require individual breakout surveys and reports for units, groups, departments, sections, etc.

- ☒ No
- ☐ Yes

COMMANDER'S CONSENT VERIFICATION

- ☐ I have obtained consent by the Commander to request this assessment.
- ☐ I have obtained consent by the Commander to receive the final survey analysis report.

(after completing the Commander's Consent Verification)

Online survey:
number of
surveys
completed can
be monitored
by
administrator
&
faster turnout
with results



Defense Equal Opportunity Management Institute

Organizational Climate Survey (DEOCS)

DEOCS UCA Header

Request Form *(All areas must be completed to process your request)*

GENERAL INFORMATION

BRANCH OF SERVICE:

SERVICE COMPONENT:

UNIT INFORMATION

UIC/PAS Code:

Title of Organization: *(Limited to 25 characters)*

Street: *(If N/A enter NONE)*

City:

State/Location:

Zip Code:

Number Assigned: *(Number Only: above 15)*

COMMANDER/DIRECTOR INFORMATION

Last Name:

Rank/Grade:

E-Mail Address:

SURVEY DESIGN INFORMATION

Locally Developed Question(s): *(Number Only: 0 to 10)*

You can tailor the survey with your own locally developed questions

Back Forward Stop Search Favorites History Print Mail New Window

Links >> Address https://www.famnet.com/deocs/public/requestForm.cfm

Title of Organization: (Limited to 25 characters)

Street: (If N/A enter NONE)

City:

State/Location:

Zip Code:

Number Assigned: (Number Only: above 15)

COMMANDER/DIRECTOR INFORMATION

Last Name:

Rank/Grade:

E-Mail Address:

SURVEY DESIGN INFORMATION

Locally Developed Question(s): (Number Only: 0 to 10)

Number of Bubble Survey Response Sheets Required to take Paper Survey:
 (Number Only)

Response Sheet Mailing Instruction:

SURVEY ADMINISTRATOR INFORMATION

Last Name:

Rank/Grade:

E-Mail Address:

DSN Phone Number:

Commercial Phone Number:

Always request more survey response sheets, or username/passwords than you really need.



Points of Contact

- **CAPTAIN KAREN J. GREGORY**
 - Karen.Gregory@patrick.af.mil
- **MSGT PEDRO CORRALIZA**
 - Pedron.Corraliza@patrick.af.mil
- **MSGT MIGUEL PIÑEIRO**
 - Miguel.Piero@patrick.af.mil
- **DSN 854-1586/1590**



Steps in using the DEOCS

- **ASSESS**
 - Share the results with your organization
 - Validate the results through other sources
- **Plan and Implement**
 - Establish an action team
- **Evaluate**
 - Conduct a follow-up DEOCS in 6-12 months



Summary

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